AMENDMENTS TO THE SPECIFICATION

Please replace the paragraph beginning at page 1, line 4 and ending on line 8 with the following rewritten paragraph:

[0001] This continuation application claims the benefit of and priority to and incorporates by reference U.S. Provisional Application Serial No. 60/449,174[[,]] filed February 24, 2003[[,]] and to U.S. Provisional Application Serial No. 60/449,263[[,]] filed February 24, 2003.

Please replace the paragraph beginning at page 33, line 1 and ending on line 17 with the following rewritten paragraph:

[0063] FIG. 7 8 is a pair of panels of charts and graphs that illustrates the effect of the proposed treatment on the blood pressure in the renal vein of the patient. The panel 610 shows the catheter 111 in the renal artery 106 with the balloon 112 inflated. The blood pressure graph below shows the blood pressure measured along the cannulated segment of the renal artery 106. Distally (upstream) of the balloon, 112 the renal vein blood pressure 601 is 25 mmHg, and downstream of the balloon 112, the blood pressure 602 is 5 mmHg (normal venous pressure or the baseline). The following panel 611 shows the same segment of the renal vein with the balloon 112 inflated more. Since the balloon now occludes more of the cross-section of the renal vein, the upstream pressure 603 is now 35 mmHg. The downstream pressure 602 stays 5 mmHg unaffected by the balloon inflation.

Please replace the paragraph beginning at page 33, line 18 and ending on page 19, line 5 with the following rewritten paragraph:

LE-217J Response OA 10-25-07 TET/cae 2

[0064] FIG. 8 9 illustrates an alternative embodiment in which the kidney 701 107 is protected from contrast nephropathy by temporarily elevating the pressure in the renal pelvis of the kidney 701. The renal pelvis is a cavity in the middle of the kidney that is an extension of the ureter 702. The urine formed in the nephrons of the kidney drains into the renal pelvis. From the pelvis, it drains into the bladder 703 via the ureter 702 and 705. In a normal subject patient, the pressure in the pelvis of the kidney is at the atmospheric level or slightly above it. Unless there is an obstruction in the ureter, the pressure is elevated significantly only if the bladder is full. The kidney responds to the elevated pelvic pressure by reducing the renal blood flow and GFR, so as to slow the production of urine until the bladder is emptied and the pelvic pressure is reduced.